Fields of Opportunities

STATE OF IOWA

CHESTER J. CULVER
GOVERNOR
PATTY JUDGE
LT. GOVERNOR

IOWA BOARD OF MEDICINE
MARK BOWDEN
EXECUTIVE DIRECTOR

News Release

Summary of October 21-22, 2010, meeting of the Iowa Board of Medicine

Total Cases Reviewed: The Board reviewed 148 total cases.

New Investigative Cases Reviewed: The Board reviewed 44 new investigative cases.

Combined Statement of Charges and Settlement Agreement: Upon a determination by the Board that probable cause exists to take formal disciplinary action, the Board and the licensee may enter into a combined Statement of Charges and Settlement Agreement to resolve the matter. The combined Statement of Charges and Settlement Agreement contains the allegations of the Board and the sanctions.

The Board approved one Combined Statement of Charges and Settlement Agreement. Under the Statement of Charges, the Board charged a surgeon with failing to provide appropriate treatment to numerous surgical patients. Under the Settlement Agreement, the physician was placed on probation for a period of five years subject to Board monitoring and he must complete a supervised educational program. He is also prohibited from reading electrocardiograms unless he demonstrates that he is safe to do so and he receives prior written approval from the Board. He was also issued a public reprimand and ordered to pay a $5,000 fine.

Settlement Agreements: After the Board has determined that probable cause exists to take formal disciplinary action and formal disciplinary charges have been filed, the Board and the licensee may enter into a Settlement Agreement to resolve the pending disciplinary charges rather than hold a formal disciplinary hearing.

The Board approved three Settlement Agreements:

1. A physician who practices family medicine, emergency medicine and obstetrics who was charged with failing to provide appropriate treatment to numerous patients was placed on probation for a period of five years subject to Board monitoring, was ordered to complete a supervised educational program and was issued a public reprimand.

2. A physician who formerly practiced internal medicine was issued a public reprimand for engaging in a pattern of disruptive behavior in the practice of medicine and he retired from the practice of medicine and agreed not to practice medicine in the future.

400 SW 8th STREET, SUITE C, DES MOINES, IA 50309-4686
PHONE:515-281-5171 FAX:515-242-5908 www.medicalboard.iowa.gov

3. A physician who formerly practiced family medicine who was charged with engaging in a pattern of drug abuse was prohibited from practicing medicine in Iowa until she receives written approval from the Board. Prior to seeking to return to the practice of medicine in Iowa, the physician must complete a Board-approved substance abuse evaluation and demonstrate that she is safe to practice medicine. Should the Board choose to permit the physician to return to the practice of medicine in Iowa, she will be placed on probation for a period of five years subject to substance abuse counseling and Board monitoring. The physician was also issued a public reprimand and ordered to pay a $5,000 fine.

Agreements Not to Practice Medicine: Under very limited circumstances a licensee may enter into an Agreement Not to Practice Medicine with the Board. Generally, such agreements are utilized when formal disciplinary charges are pending and other legal interests prevent the Board from holding a disciplinary hearing or the Board believes that a licensee is unsafe to practice medicine and the licensee agrees not to practice medicine pending the Board's regular legal proceedings.

The Board approved one Agreement Not to Practice Medicine. A physician who pleaded guilty to one count of health care fraud and one count of mail fraud, agreed not to practice medicine until the Board's pending disciplinary charges are resolved.

Disciplinary Decisions: After the Board has filed formal charges a disciplinary hearing may be held before the Board. After the hearing has been held, the Board issues a Findings of Fact, Conclusions of Law, Decision and Order resolving the pending disciplinary charges.

The Board approved a Findings of Fact, Conclusions of Law, Decision and Order. Under the terms of the Order, a physician who practices urology and general surgery who was charged with failing to provide appropriate treatment to numerous patients was prohibited from practicing general surgery unless he completes a comprehensive clinical competency evaluation and receives written approval from the Board. The physician was also required to complete a medical record keeping course and pay a $5,000 fine and was issued a public reprimand.

Confidential Evaluation Reports: The Board may order a licensee to complete a confidential evaluation due to the following concerns: competency; substance abuse; physical or mental health; disruptive behavior or sexual misconduct. The Board reviews confidential evaluation reports to determine whether further Board action is appropriate including, disciplinary action or monitoring.

The Board reviewed three Board-approved confidential evaluations reports:

1. The Board reviewed one confidential substance evaluation report and determined that the physician is not impaired and does not require further monitoring.

2. The Board reviewed a confidential neuropsychological evaluation report and determined that the physician suffers from a neuropsychological impairment and voted to initiate negotiations of formal disciplinary action.

3. The Board reviewed a second confidential substance evaluation report and voted to refer the physician to the Iowa Physician Health Program for counseling and monitoring.

Confidential Evaluation Orders: The Board may order a licensee to complete a confidential evaluation due to the following concerns: competency; substance abuse; physical or mental health; disruptive behavior or sexual misconduct.

The Board ordered two physicians to complete Board-approved confidential evaluations:

1. The Board ordered one physician to complete a confidential clinical competency evaluation due to concerns about the physician's patient care.

2. The Board ordered another physician to complete confidential neuropsychological testing due to concerns about his neurological health.

Iowa Physician Health Program (IPHP) Cases: The IPHP is a confidential health program established by the Board that evaluates and monitors licensees for the following concerns: substance abuse; physical or mental health; or disruptive behavior.

The Board reviewed one IPHP case due to concerns that a participant engaged in minor violations of his IPHP physician health contract. The Board determined that the physician should remain in the IPHP for continued monitoring.

Confidential Letters of Warning or Education: When the Board determines that probable cause does not exist to take formal disciplinary action the Board may send a confidential, non-disciplinary letter to a licensee expressing concerns and requesting that a licensee take corrective action, including further medical education.

The Board voted to issue 11 confidential Letters of Warning or Education due to the following concerns: being charged with driving under the influence of alcohol on a single occasion; failure to provide appropriate care to a patient with a fractured finger; being disciplined by another state for failure to disclose that he was placed on probation during residency training fifteen years ago; failure to complete required continuing medical education (2); becoming angry and unprofessional on a single occasion (2); improper prescribing to an elderly patient; failure to diagnose a decreased blood flow in a patient's leg; closing a medical practice without providing appropriate notice to patients; and failure to review abnormal lab tests resulting in the delayed diagnosis of cancer.

Board Appearances: The Board may ask a licensee to appear before the Board to discuss concerns when the Board determines that a face-to-face meeting will assist the Board during the investigative process.

Four physicians appeared before the Board due to the following concerns:

1. Failure to complete required continuing medical education (2);

2. Becoming angry and engaging in unprofessional conduct on a single occasion; and

3. Failure to diagnose a throat infection.

Licensure Committee: The Licensure Committee is a committee of the Board that reviews initial license applications, renewals and reinstatements. Most license applications are approved by Board staff without Licensure Committee review. However, some applications raise concerns about an applicant and the Licensure Committee must review the matter to determine whether a license should be granted, renewed or reinstated.

The Licensure Committee reviewed 12 licensure applications. Eight of license applications were granted and four applicants were asked to withdraw the application for licensure due to concerns or asked to provide further information. The Committee met with one applicant. The Committee denied two requests for refunds of the renewal fee. The Committee approved a guide which defines the services that medical students may perform.

Monitoring Committee: The Monitoring Committee is a committee of the Board that monitors licensees that have been disciplined by the Board and placed under a Board order which requires Board monitoring.

The Monitoring Committee reviewed 25 licensees who are being monitored by the Board. Six physicians appeared before the committee to discuss their Board monitoring.

Screening Committee: The Screening Committee is a committee of the Board that reviews cases that are lower priority and have not been investigated by the Board to determine whether investigation is warranted.

The Screening Committee reviewed 52 cases. The screening committee closed 41 cases without further investigation. The committee requested further investigation of 11 cases.

- A press release describing public disciplinary action taken by the Board was distributed and posted on the Board's Website on November 1, 2010.

- If you have any questions or concerns please contact Kent Nebel, Legal Director, at 515-281-7088 or kent.nebel@iowa.gov.